

Business license #	
Expiration	

BUSINESS LICENSE APPLICATION

Date	Name of Business				
AZ TPT # (if applicable) _ TPT license: CURRENT T			<u>copy oj</u>	f current TPT license is a	required.)
Yavapai County Commun	ity Health Services. No Definition of the services of the serv	Nhere any business act tificate or permit from	ivity is s	ubject to a certificate of h	e a copy of your current license from ealth or sanitary examination, before commencing h Services. Failure to do so is grounds for
Physical address of busin	ness (<i>Not</i> PO Box)				
Mailing address					
Business Phone	Ce	II		Email addr	ess
Type of businessHome-based business? YES NO					
Estimated gross annual revenue					
Business Owner(s)					
Signature Date					
		FOR TOWI	N USE	ONLY	
DATE APPLICATION SUBMIT	TED	ACCEPTED BY		□ Access □ EXSP □	HC to IT
□\$20 □\$50 □ CAS	SH	☐ CHECK #		PAYMENT	DATE
UTILITIES ACCT/CLASSIFICATION	DN			Status: □ Current	□ 30 days past due □ 30 days+ past due
APPROVED DENIED _	Zoning Administrator		Date _		[If denied, attach reason for denial.]
APPROVED DENIED _	Fire Chief		Date		
☐ APPROVED ☐ DENIED _	Building Official		Date _		
☐ APPROVED ☐ DENIED	Town Manager		Date _		
NEW EXPIRATION DATE	[DATE ISSUED		NEXT INSPEC	TION